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VaCyT

SiViFinlay

IFV INSTITUTO FINLAY DE VACUNAS

...vacunar es prevenir.

Análisis bibliométrico sobre vacunas de vectores virales

Fuente de información utilizada:

WEB OF SCIENCE™

Estrategia de búsqueda:

TITLE: ("Viral vector vaccine ") 222 records

Periodo de estudio 2000-2020

Las variables utilizadas en el análisis fueron:

⇒ Productividad científica por año.

⇒ Autores con mayor productividad científica.

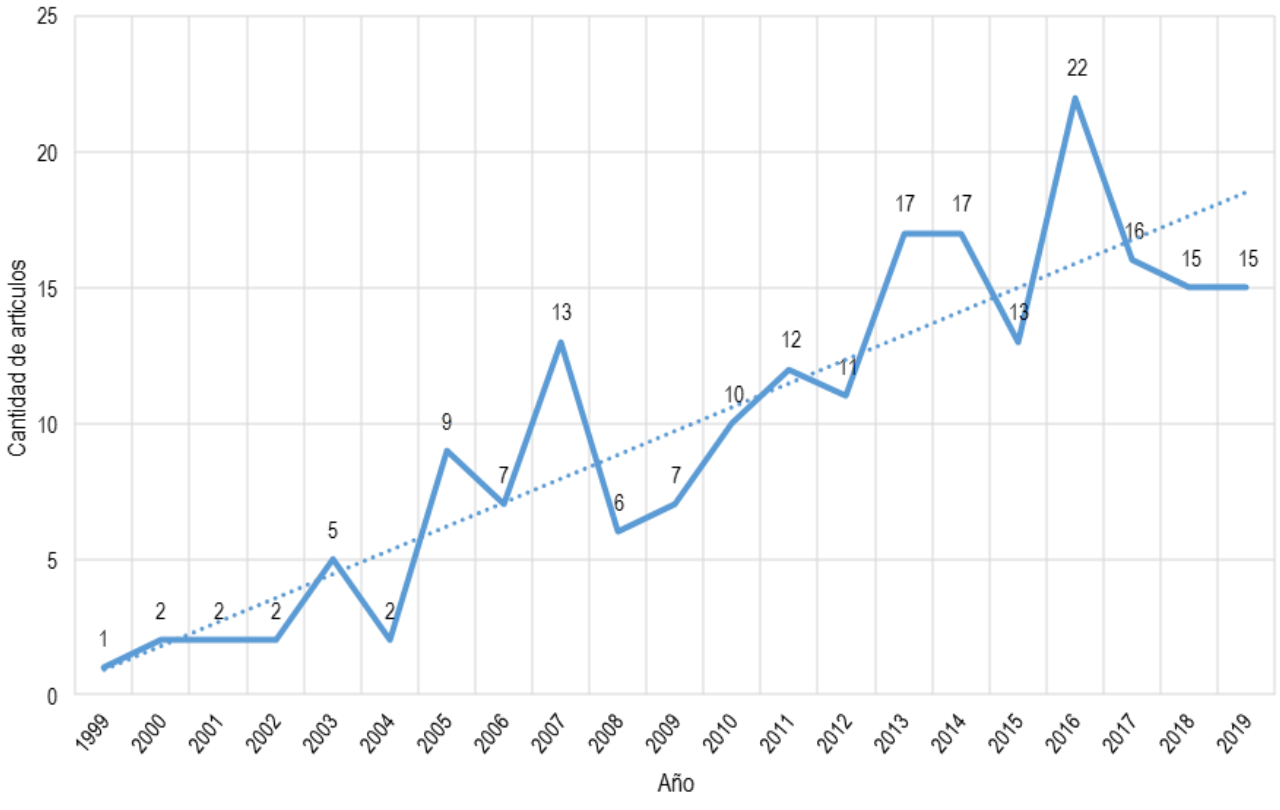
⇒ Revistas con mayor número de publicaciones sobre el tema.

⇒ Instituciones que han trabajado el tema de estudio.

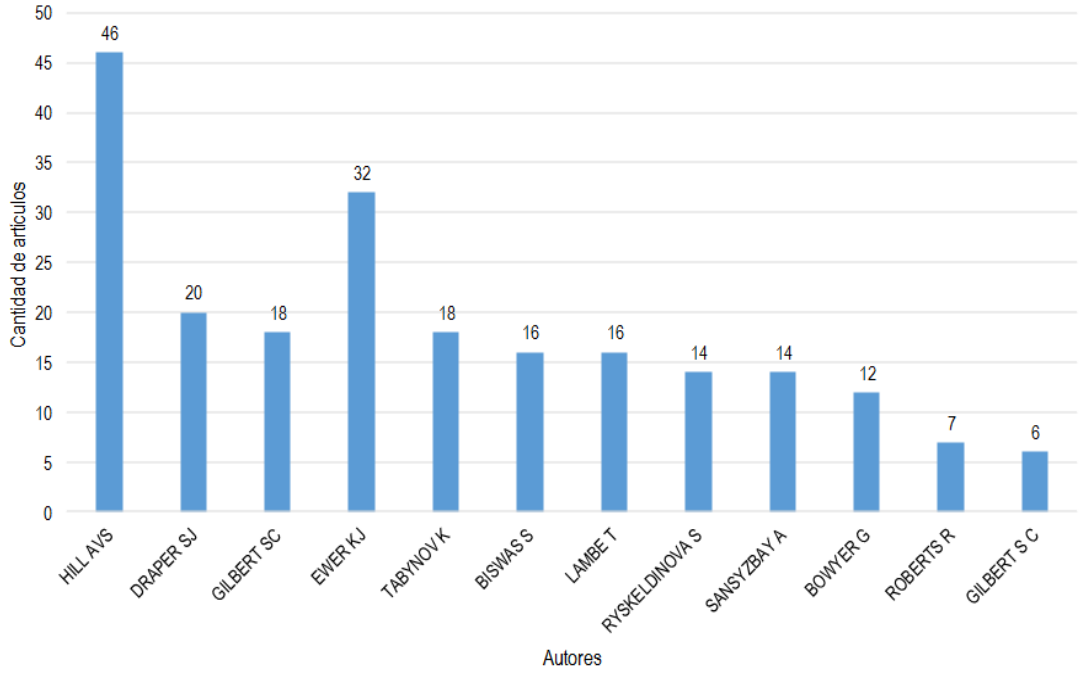
⇒ Países a la vanguardia sobre el tema.

EN ESTE NÚMERO

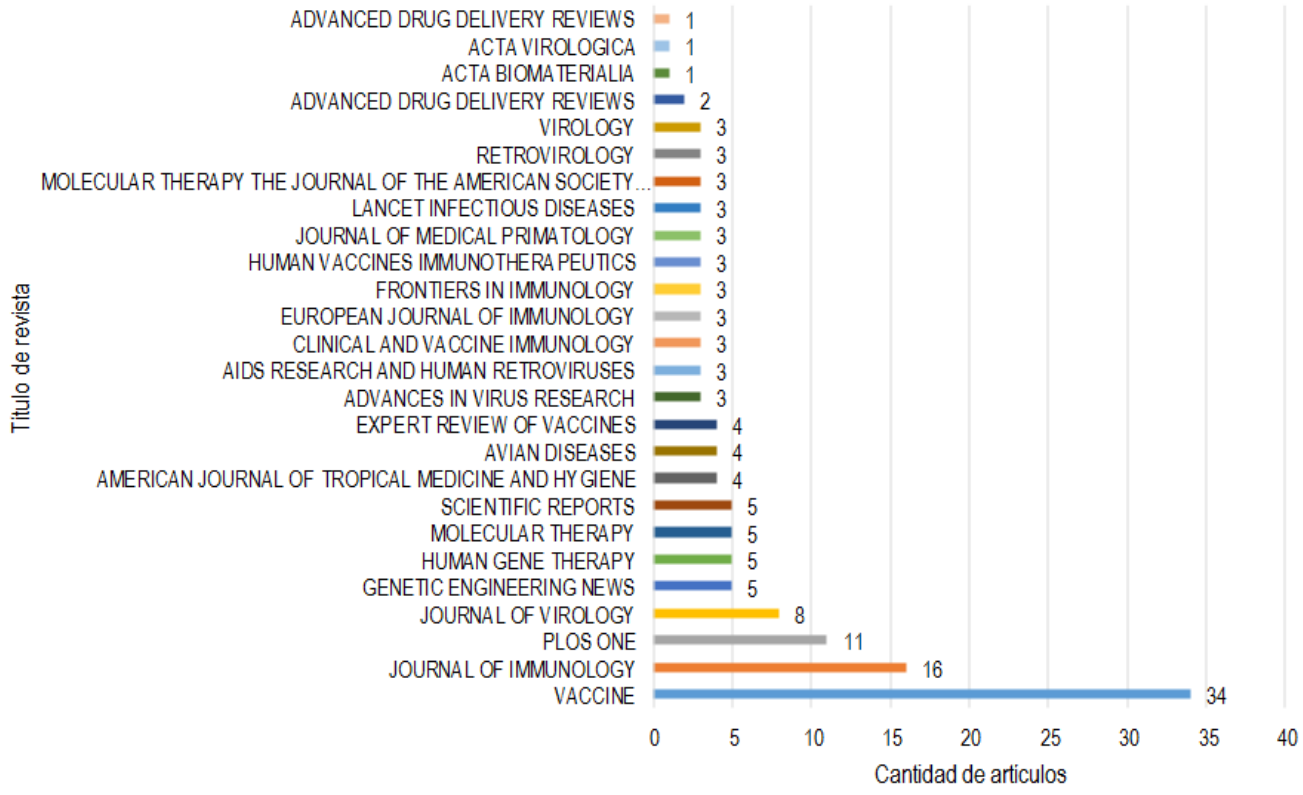
Productividad científica por año



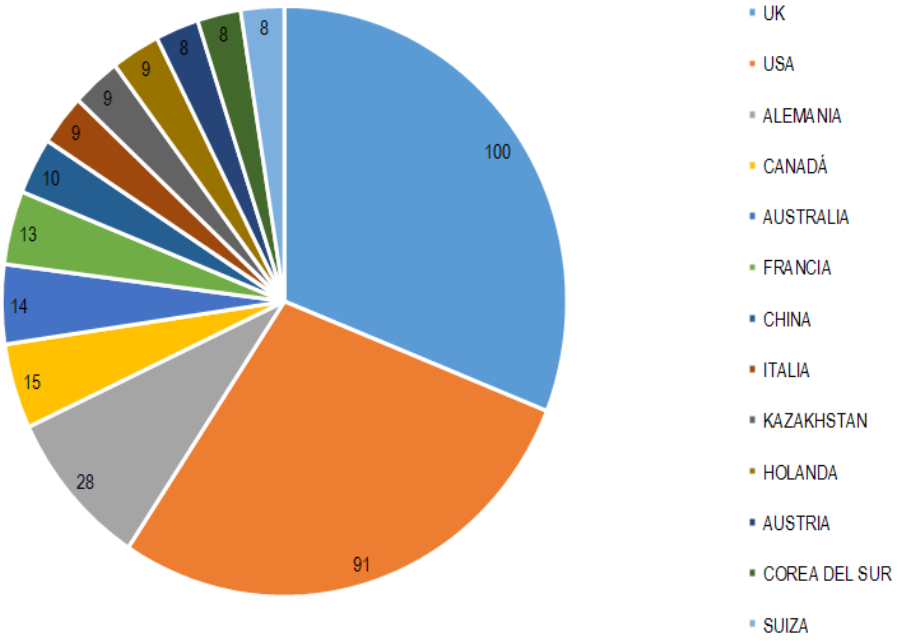
Autores con mayor productividad científica



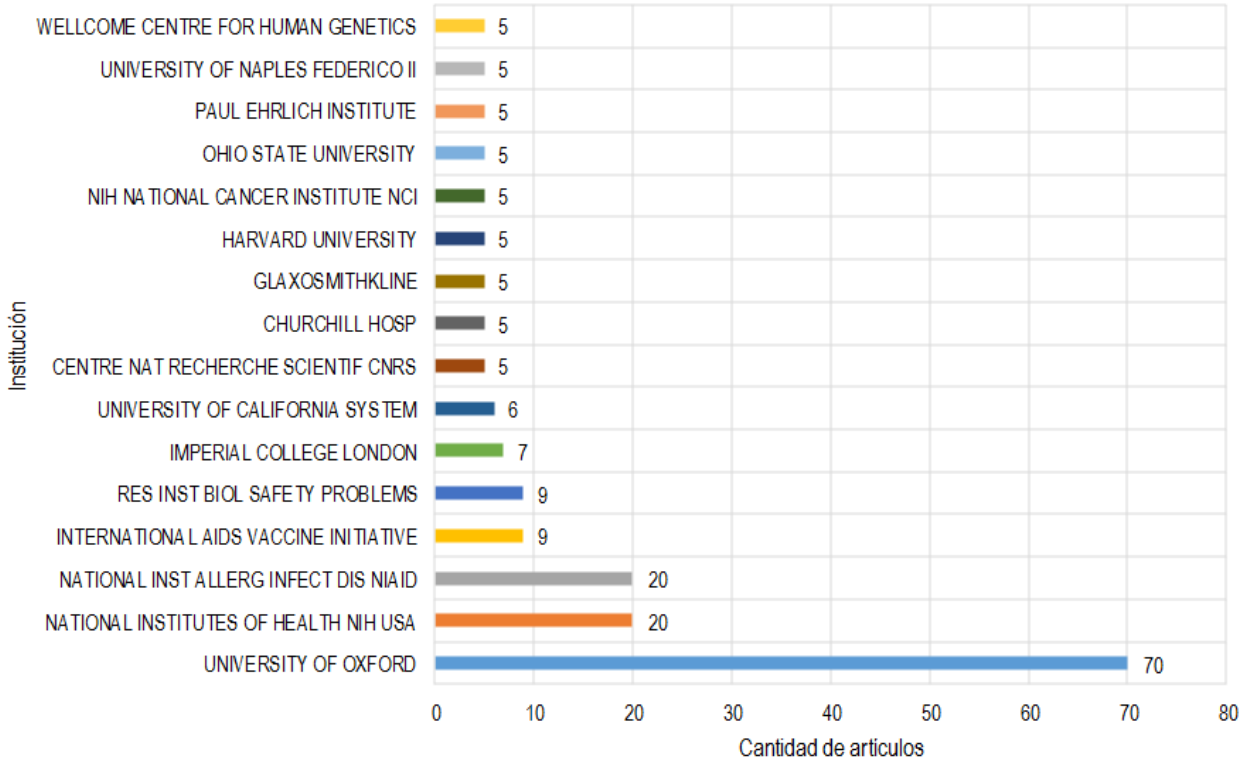
Revistas científicas que han publicado sobre el tema (2019-2020)



Producción científica por países



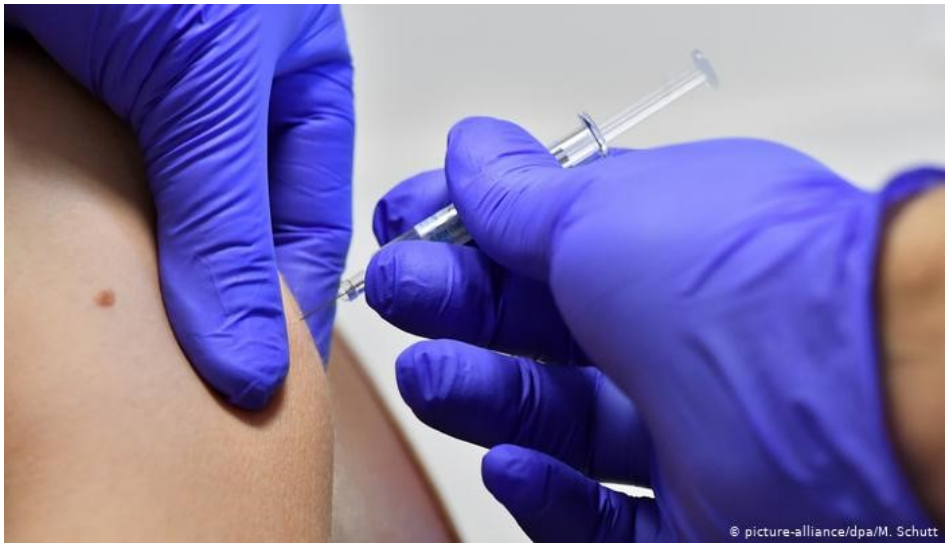
Instituciones que han trabajado el tema de estudio



Noticias en la Web

Rusia prepara vacunación masiva contra el coronavirus en octubre

1 ago. El ministro de Salud de Rusia, Mikhail Murashko, aseguró este sábado (01.08.2020) que el país se está preparando para realizar una campaña de vacunación masiva contra el coronavirus ya el mes de octubre, luego de que terminaran los ensayos clínicos de un prospecto en el que trabaja el Instituto Gamaleya, un centro de investigación estatal.



"La vacuna contra el nuevo coronavirus desarrollada por el centro Gamaleya concluyó las pruebas clínicas y ahora se preparan los documentos para su registro", dijo Murashko. Según la autoridad, los médicos y los docentes serán los primeros en recibir esta vacuna, cuya entrega a las reparticiones sanitarias del país está prevista para la segunda quincena de agosto.

"Tenemos previsto que la campaña de vacunación más amplia, que se sumará paulatinamente al nuevo sistema de atención, comience en octubre", dijo el ministro. Fuentes rusas habían adelantado en la semana a la agencia Reuters que la primera vacuna contra el coronavirus estaría en condiciones de ser distribuida en agosto, tras recibir la aprobación regulatoria.

¿Es segura?

El ministro añadió que una segunda vacuna rusa, desarrollada por el centro Véctor, se encuentra actualmente en el proceso de pruebas clínicas y afirmó que el Ministerio de Salud espera "en los próximos mes y medio o dos meses" recibir otras dos solicitudes de permiso para la realización de pruebas clínicas de nuevas inmunizaciones.

La víspera, el principal epidemiólogo de Estados Unidos, Anthony Fauci, dijo que espera que China y Rusia "estén realmente probando" las vacunas contra la COVID-19 que desarrollan "antes de administrarlas a alguien". Esto, debido a que la velocidad con que está avanzando el proceso en Rusia hace temer en Occidente que en ese país no se estén respetando las normas, pues toda nueva vacuna debe superar una serie de ensayos para asegurar no solo que sea efectiva, sino que además sea segura.

Muchos científicos temen que en este caso se esté poniendo por sobre esas consideraciones el prestigio nacional, luego de que el presidente del Fondo de Inversión Directo de Rusia, Kirill Dmitriev, vinculara el posible éxito de la vacuna rusa contra el coronavirus con el lanzamiento del Sputnik, en 1957.

Fuente: Deutsche Welle. Disponible en https://cutt.ly/Ifb1NQl

Russia Sets Mass Vaccination for October After Shortened Trial

2 ago. Russia plans to launch a nationwide vaccination campaign in October with a coronavirus vaccine that has yet to complete clinical trials, raising international concern about the methods the country is using to compete in the global race to inoculate the public.

The minister of health, Mikhail Murashko, said Saturday that the plan was to begin by vaccinating teachers and health care workers.

He also told the RIA state news agency that amid accelerated testing, the laboratory that developed the vaccine was already seeking regulatory approval for it.

Russia is one of a number of countries rushing to develop and administer a vaccine. Not only would such a vaccine help alleviate a worldwide health crisis that has killed more than 680,000 people and badly wounded the global economy, it would also become a symbol of national pride. And Russia has used the race as a propaganda tool, even in the absence of published scientific evidence to support its claim as a front-runner.

"I do hope that the Chinese and the Russians are actually testing the vaccine before they are administering the vaccine to anyone," Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases in the United States, warned a congressional hearing on Friday.

Fuente: The New York Times. Disponible en https://cutt.ly/gfOq9LQ

Nuevo medicamento cubano con resultados "muy alentadores" contra la COVID-19

2 ago. El medicamento cubano conocido hasta el momento con el nombre de CIGB-300 muestra resultados «muy alentadores» frente a la COVID-19, en su primera fase de evaluación clínica, de acuerdo con medios de prensa oficiales.

El fármaco, de acción antiviral, fue diseñado por el Centro de Ingeniería Genética y Biotecnología (CIGB) de La Habana, y se estudia como parte de las investigaciones que lleva adelante la ciencia cubana para el enfrentamiento a la pandemia, señaló en Facebook el grupo empresarial BioCubaFarma.

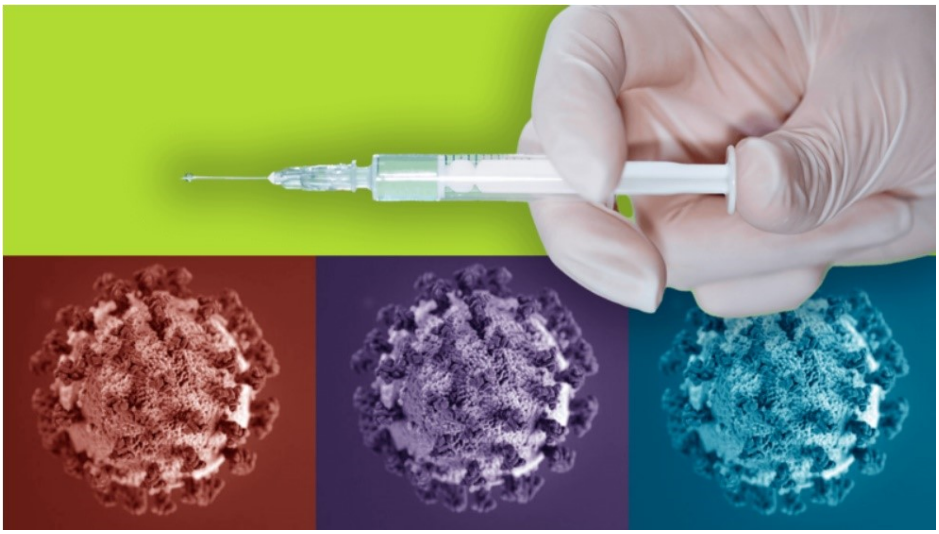
«Con eficacia antitumoral demostrada previamente», el CIGB-300 es objeto de un ensayo clínico controlado en pacientes positivos al SARS-CoV-2, iniciado en mayo de este año, apunta Cubadebate, que no ofrece estadísticas conclusivas o preliminares acerca del ensayo.

El estudio busca conocer la eficacia de este medicamento frente al coronavirus SARS-CoV-2, siguiendo los pasos de investigaciones realizadas con otros fármacos, que también han tenido buenos resultados.

En total, el CIGB trabaja hoy en 16 líneas de investigación relacionadas con el tratamiento y control de la COVID-19, de acuerdo con el Dr. Gerardo Guillén, director de investigaciones biomédicas de la reconocida institución científica.

Fuente: On Cuba News. Disponible en https://cutt.ly/gfOq9LQ

Debate begins over who's first in line for COVID-19 vaccine



2 ago. Who gets to be first in line for a COVID-19 vaccine? U.S. health authorities hope by late next month to have some draft guidance on how to ration initial doses, but it's a vexing decision.

"Not everybody's going to like the answer," Dr. Francis Collins, director of the National Institutes of Health, recently told one of the advisory groups the government asked to help decide. "There will be many people who feel that they should have been at the top of the list."

Traditionally, first in line for a scarce vaccine are health workers and the people most vulnerable to the targeted infection.

But Collins tossed new ideas into the mix: Consider geography and give priority to people where an outbreak is hitting hardest.

And don't forget volunteers in the final stage of vaccine testing who get dummy shots, the comparison group needed to tell if the real shots truly work.

"We owe them ... some special priority," Collins said.

Huge studies this summer aim to prove which of several experimental COVID-19 vaccines are safe and effective. Moderna Inc. and Pfizer Inc. began tests last week that eventually will include 30,000 volunteers each; in the next few months, equally large calls for volunteers will go out to test shots made by AstraZeneca, Johnson & Johnson and Novavax. And some vaccines made in China are in smaller late-stage studies in other countries.

For all the promises of the U.S. stockpiling millions of doses, the hard truth: Even if a vaccine is declared safe and effective by year's end, there won't be enough for everyone who wants it right away -- especially as most potential vaccines require two doses.

It's a global dilemma. The World Health Organization is grappling with the same who-goes-first question as it tries to ensure vaccines are fairly distributed to poor countries -- decisions made even harder as wealthy nations corner the market for the first doses.

In the U.S., the Advisory Committee on Immunization Practices, a group established by the Centers for Disease Control and Prevention, is supposed to recommend who to vaccinate and when -- advice that the government almost always follows.

But a COVID-19 vaccine decision is so tricky that this time around, ethicists and vaccine experts from the National Academy of Medicine, chartered by Congress to advise the government, are being asked to weigh in, too.

Setting priorities will require "creative, moral common sense," said Bill Foege, who devised the vaccination strategy that led to global eradication of smallpox. Foege is co-leading the academy's deliberations, calling it "both this opportunity and this burden."

With vaccine misinformation abounding and fears that politics might intrude, CDC Director Robert Redfield said the public must see vaccine allocation as "equitable, fair and transparent."

How to decide? The CDC's opening suggestion: First vaccinate 12 million of the most critical health, national security and other essential workers. Next would be 110 million people at high risk from the coronavirus -- those over 65

who live in long-term care facilities, or those of any age who are in poor health -- or who also are deemed essential workers. The general population would come later.

CDC's vaccine advisers wanted to know who's really essential. "I wouldn't consider myself a critical healthcare worker," admitted Dr. Peter Szilagyi, a pediatrician at the University of California, Los Angeles.

Indeed, the risks for health workers today are far different than in the pandemic's early days. Now, health workers in COVID-19 treatment units often are the best protected; others may be more at risk, committee members noted.

Beyond the health and security fields, does "essential" mean poultry plant workers or schoolteachers? And what if the vaccine doesn't work as well among vulnerable populations as among younger, healthier people? It's a real worry, given that older people's immune systems don't rev up as well to flu vaccine.

With Black, Latino and Native American populations disproportionately hit by the coronavirus, failing to address that diversity means "whatever comes out of our group will be looked at very suspiciously," said ACIP chairman Dr. Jose Romero, Arkansas' interim health secretary.

Consider the urban poor who live in crowded conditions, have less access to healthcare and can't work from home like more privileged Americans, added Dr. Sharon Frey of St. Louis University.

And it may be worth vaccinating entire families rather than trying to single out just one high-risk person in a household, said Dr. Henry Bernstein of Northwell Health.

Whoever gets to go first, a mass vaccination campaign while people are supposed to be keeping their distance is a tall order. During the 2009 swine flu pandemic, families waited in long lines in parking lots and at health departments when their turn came up, crowding that authorities know they must avoid this time around.

Operation Warp Speed, the Trump administration's effort to speed vaccine manufacturing and distribution, is working out how to rapidly transport the right number of doses to wherever vaccinations are set to occur.

Drive-through vaccinations, pop-up clinics and other innovative ideas are all on the table, said CDC's Dr. Nancy Messonnier.

As soon as a vaccine is declared effective, "we want to be able the next day, frankly, to start these programs," Messonnier said. "It's a long road."

Fuente: Modern Healthcare. Disponible en https://cutt.ly/yfPtBls

Investigadores de la UABC participan en proyecto para desarrollo de vacuna contra el COVID-19

3 ago. Científicos de la Universidad Autónoma de Baja California (UABC) participan en uno de los cuatro proyectos en México que trabajan para desarrollar una vacuna contra el COVID-19 que garantice tanto la manufactura como el abasto para la población.

“Teníamos cierta preocupación de que, en México, como ha pasado antes, no hubiera un abasto de vacunas”, explicó José Manuel Aguilar Yáñez, líder de la iniciativa sin fines de lucro Jonas Salk, conformada por científicos tanto de la UABC como del Instituto Tecnológico y de Estudios Superiores de Monterrey.

Dicha iniciativa fue nombrada en honor al científico estadounidense Jonas Salk, quién descubrió y donó la vacuna contra la poliomielitis en 1953.

Los otros tres esfuerzos en el país son de la Universidad de Querétaro, el Instituto de Biotecnología de la Universidad Nacional Autónoma de México (UNAM) y la empresa Avimex en conjunto con investigadores del Instituto Mexicano del Seguro Social (IMSS) y la UNAM.

La intención es que México

garantice la producción de su propia vacuna y no se atenga a una lista de espera, explicaron científicos.

El Secretario de Relaciones Exteriores, Marcelo Ebrard firmó en mayo pasado un acuerdo de colaboración con la primera ministra de Noruega, Erna Solberg, para participar en la Coalición para las Innovaciones de Preparación para Epidemias (CEPI), organismo que desarrolla vacunas contra enfermedades nuevas.

La vacuna con base en ADN que se desarrolla en la UABC de Ensenada desde enero se encuentra en fase preclínica, y de avanzar conforme a lo planeado podría estar lista para la población a finales de 2021, precisó Aguilar Yáñez.

La intención es que México garantice la producción de su propia vacuna y no se atenga a una lista de espera, explicaron científicos.

Por otro lado, explicó por qué la elaboración de una vacuna puede extenderse por meses incluso en los países con más recursos.

"Al ser tan nuevo, aunque seas el país más poderoso del mundo, tienes herramientas, pero cuando lo estudias no te da el tiempo porque tienes un problema grande que es gente enferma en los hospitales, no sabes qué hacer con las tasas de contagio o qué vías de contagio tienes", detalló.

"Eso por un lado desconcierta a los gobiernos tan grandes, hay que verlo de esta manera, son organizaciones sumamente burocráticas, los tiempos de respuesta son muchas decisiones en una cadena de mando muy larga".

Se ha concluido el diseño molecular y manufactura del primer prototipo de la vacuna elaborada en UABC y se están realizando estudios a nivel celular en ratones en la Universidad de California San Diego (UCSD) con el objetivo de garantizar la seguridad de la vacuna mexicana, de acuerdo con el portal de la iniciativa Jonas Salk.

De forma paralela investigadores alrededor del mundo trabajan a marchas forzadas en más de 165 proyectos de vacuna, de los cuales, 27 han llegado a las pruebas en humanos.

El objetivo común es encontrar una vacuna segura que esté disponible el próximo año.

"México está haciendo todo su esfuerzo", reiteró Manuel Alejandro Carballo, profesor de la Facultad de Ciencias en la UABC. "Capacidad hay, de ahí a tener los fondos para llevarlo más allá sería la limitante".

La CEPI financia nueve proyectos de vacunas en el mundo, y próximamente ampliará el apoyo a tres más, de los cuales, México podría ser uno.

"Si vemos cómo se están moviendo los gobiernos a nivel mundial, están acaparando, están comprando en preventa vacunas, están apoyando fuertemente para el momento que ya se pruebe que la vacuna es segura y eficiente en miles de personas", subrayó el catedrático.

"Para los países latinoamericanos sí tendríamos que entrar a la espera y sí sería una larga espera, por eso es súper importante que empecemos a desarrollar nuestra propia vacuna".

Fuente: The San Diego Union Tribune. Disponible en https://cutt.ly/IfPjmdW

BioMérieux lanza un test sindrómico que permite identificar enfermedades respiratorias y la COVID-19

3 ago. BioMérieux lanza un test sindrómico que permite identificar enfermedades respiratorias y la COVID-19.

BioMérieux ha lanzado un nuevo test, 'BioFire Respiratory 2.1+ Panel', para la detección de los 23 patógenos respiratorios más comunes, incluyendo el SARS-CoV-2, causante de la enfermedad COVID-19. Se trata de una herramienta altamente sensible y específica de PCR rápida. En 45 minutos aproximadamente, el test analiza dos dianas génicas (gen S y gen M) por triplicado del virus SARS-CoV-2 y del resto de los principales patógenos respiratorios circulantes tales como las diferentes BioMérieux lanza un test sindrómico que

permite identificar enfermedades respiratorias y el COVID-19

variantes de la gripe, el VSR, el resto de los coronavirus humanos (229E, HKU1, OC43, NL63 y MERS coronavirus), la 'Bordetella pertussis' y la 'Bordetella Parapertussis'. Este nuevo test sindrómico permite a los sanitarios identificar a través de una única prueba a los pacientes con patógenos respiratorios comunes y diferenciarlos de aquellos con SARS-CoV-2. El panel cuenta con el marcado CE-IVD, y está registrado en la Agencia Española del Medicamento y en Portugal. "Conseguir BioMérieux lanza un test sindrómico que permite identificar enfermedades respiratorias y el COVID-19

diferenciar el agente etiológico que produce la enfermedad, y así saber si el paciente tiene COVID-19, gripe o cualquier otro microorganismo respiratorio es crítico actualmente para la gestión hospitalaria y del paciente. Este aspecto será mucho más necesario en el próximo otoño-invierno cuando los síntomas de catarro o gripales, producidos por los distintos patógenos, puedan ser confundidos con COVID-19", comenta el responsable de la línea de BioFire en bioMérieux, Juan Blanco.

Fuente: Infosalus. Disponible en https://cutt.ly/TfPkhph

I Was Wrong: We Can't Skip Phase 3 Vaccine Trials

3 ago. I wrote a blog post over the weekend that has generated tremendous pushback, including an op-ed in the New York Times as well as thousands of comments on Twitter.

In my previous post, I suggested that while we're pursuing Phase 3 testing of several promising Covid-19 vaccines, we could simultaneously offer those same, unapproved vaccines to a wider community of volunteers, as long as those volunteers were fully informed. The benefits of moving quickly, I argued, would outweigh the risks.

I was wrong. After reading many of the responses to my article, some of them outlining the risks in greater detail, I have concluded that (1) the risks are greater than I presented them, and (2) the benefits are not as great as I had thought.

On point (1), there are several risks that I didn't emphasize sufficiently. One is that although phase 1 and 2 trials establish safety, they don't tell the whole story. Phase 3 also looks at safety, and because many more subjects are involved, Phase 3 can identify less-common side effects that might still be very bad. (One example is ADE, which can make a viral illness worse than it would otherwise be.) These less-common side effects are a big risk of moving too quickly.

Another risk is that of trust: as many people pointed out on Twitter, if we expand the distribution of vaccines too quickly, and then the vaccine doesn't work, we may seriously undermine the public's trust in any eventual vaccine that really does work. That in turn will reduce the number of people willing to be vaccinated, which could cause

serious harm to public health.

On the benefit side, my article assumed that we could quickly make millions of doses available before Phase 3 trials completed. I was wrong there too. We can and should ramp up production of vaccines before Phase 3 trials are over–and several manufacturers are doing just that, with government support. But these vaccines aren't available in large quantities yet, and by the time they are, Phase 3 trials will be much further along.

One thing I've learned as a scientist is that if you get something wrong, you need to admit it, learn from the experience, and move on. I was wrong.

Fuente: FORBES. Disponible en https://cutt.ly/YfPl0oK

¿Están algunas personas protegidas contra el coronavirus? Esto es lo que debes saber sobre las células T

3 ago. Ahora llevamos más de siete meses en la pandemia de coronavirus que ha cambiado la vida de la mayoría de los habitantes de la Tierra. Y si bien es cierto que la comunidad científica ha aprendido muchas cosas sobre el virus SARS-CoV-2 y la enfermedad que causa, covid-19, también hay muchas lagunas en nuestra comprensión.

Un gran misterio es ¿por qué algunas personas se enferman gravemente e incluso mueren a causa de su enfermedad, mientras que otras personas similares no muestran síntomas y pueden no darse cuenta de que han sido contagiadas?

Conocemos algunos de los grandes factores que ponen a las personas en mayor riesgo de tener un curso de enfermedad grave, incluso mortal: tener más de 60 años; tener sobrepeso u obesidad; tener una o más enfermedades crónicas como diabetes, enfermedad cardiovascular, enfermedad renal o pulmonar y cáncer; y ser una persona de color: negro, latino o nativoamericano.

Pero también podría ser cierto lo contrario: ¿podrían ciertas personas realmente tener algún tipo de protección?

Un artículo resumen publicado recientemente en la revista Nature Reviews Immunology presenta una posibilidad tentadora: un gran porcentaje de la población parece tener células inmunes que son capaces de reconocer partes del virus SARS-CoV-2, y que posiblemente les podrían estar dando una ventaja en la lucha contra la infección. En otras palabras, algunas personas pueden tener algún grado desconocido de protección.

«Lo que descubrimos es que de las personas que nunca habían estado expuestas al SARS Cov2… aproximadamente la mitad tenía alguna reactividad de células T», dijo a CNN el coautor del artículo Alessandro Sette del Centro de Investigación de Vacunas y Enfermedades Infecciosas en el Instituto de Inmunología de La Jolla.

Inmunología 101

Para entender por qué eso es importante, aquí hay un pequeño curso intensivo en inmunología. El sistema inmune humano, que tiene la tarea de mantenerte saludable frente a invasores bacterianos, virales, fúngicos, parasitarios y de otro tipo, tiene dos componentes principales: el sistema inmune innato y el sistema inmune adaptativo.

El sistema inmune innato es la primera línea de defensa. Algunas partes incluyen barreras físicas como la piel y las membranas mucosas, que impiden físicamente la entrada de los invasores. También incluye ciertas células, proteínas y químicos que hacen cosas como crear inflamación y destruir las células invasoras.

Cuando el sistema inmunitario innato es inmediato e inespecífico (trata de evitar que algo ingrese al cuerpo), el sistema inmunitario adaptativo se dirige contra un invasor específico y previamente reconocido. Esto toma un poco más de tiempo para ponerse en marcha.

El sistema inmunitario adaptativo incluye un tipo de glóbulo blanco, llamado célula B, que patrulla el cuerpo en busca de los tipos malos. Cada una de las células B tiene un anticuerpo único que se asienta en su superficie y puede unirse a un antígeno único (el nombre técnico del invasor extraño) y evitar que ingrese a una célula huésped. Cuando encuentra y se une a un tipo malo, la célula B se activa: se copia y produce anticuerpos, y finalmente crea un mega ejército de neutralizadores para ese invasor en particular.

De ahí provienen los anticuerpos creados por el sistema inmunitario de las personas que han tenido covid-19.

Desafortunadamente, algunos estudios recientes han encontrado que los anticuerpos contra este coronavirus en particular pueden desaparecer rápidamente, especialmente en personas que han tenido casos leves de covid-19. Esto ha preocupado a muchos investigadores: debido a que la respuesta de los anticuerpos parece desvanecerse rápidamente, la comunidad científica no está segura de cuánto tiempo una persona que ha sido infectada con este virus permanecerá protegida de una nueva infección. Esto también es preocupante, ya que dependemos de las vacunas para activar una respuesta de anticuerpos para ayudar a protegernos, y queremos que esa protección dure mucho tiempo.

Afortunadamente, los anticuerpos no son la única arma que utiliza nuestro sistema inmunitario adaptativo para evitar una infección. Entra entonces la célula T. Las células T, que vienen en tres variedades, son creadas por el cuerpo después de una infección para ayudar con futuras infecciones del mismo invasor. Una de esas células T ayuda al cuerpo a recordar al invasor en caso de que vuelva a golpear, otra caza y destruye las células huésped infectadas y una tercera ayuda de otras maneras.

Fuente: CNN en español. Disponible en https://cutt.ly/HfPzO9D

Lo que sabemos de la vacuna de Novavax contra el coronavirus

5 Ago. Una tercera vacuna contra el coronavirus se sumó al grupo de desarrollos que han reportado resultados prometedores. Se trata de la vacuna de Novavax, una compañía estadounidense que publicó un estudio que muestra que el producto genera respuesta inmune y es segura.

Esto es lo que sabemos:

1. ¿En qué va la vacuna?

La vacuna de Novavax Inc. contra el coronavirus va en la fase 1. En total 131 voluntarios saludables entre los 18 y los 59 años recibieron dos dosis y desarrollaron anticuerpos.

«Eso es bueno. Eso es realmente alentador», dijo a CNN el presidente de Novavax, el Dr. Gregory Glenn.

Los participantes recibieron dos dosis con y sin adyuvante, un componente para estimular el sistema inmunológico.

2. ¿Qué resultados obtuvo?

La vacuna fue «generalmente bien tolerada», dice Novavax y fue segura. Además, la compañía señala que la vacuna «indujo títulos de neutralización en el 100 % de los participantes», es decir que desarrollaron anticuerpos. La vacuna también indujo respuesta de las células T, que son células inmunes.

"LA VACUNA FUE «GENERALMENTE BIEN TOLERADA», DICE NOVAVAX Y FUE SEGURA. ADEMÁS, LA COMPAÑÍA SEÑALA QUE LA VACUNA «INDUJO TÍTULOS DE NEUTRALIZACIÓN EN EL 100 % DE LOS PARTICIPANTES», ES DECIR QUE DESARROLLARON ANTICUERPOS."

El informe de Novavax fue enviado a una revista médica, pero todavía no ha sido revisado por científicos fuera de la empresa, ni ha sido publicado.

3. ¿Qué efectos secundarios tuvo?

Los efectos secundarios fueron leves, explica Novavax. «Después de la primera dosis, dolor y sensibilidad fueron los síntomas locales más frecuentes y eventos sistemáticos menos frecuentes fueron dolor de cabeza, fatiga y dolor muscular, entre los más comunes». La compañía explicó que con la segunda dosis, como se esperaba, hubo más reacciones, pero que la «mayoría de los síntomas fueron de grado 1 o menos». Los síntomas duraron menos de dos días, afirman.

4. También se probó en monos

Novavax también publicó datos de animales el martes. En el estudio, 12 monos recibieron dos dosis de la vacuna y luego fueron expuestos al virus que causa covid-19. Once de los 12 monos no mostraron signos de infección en la nariz o los pulmones. Un mono, que recibió una dosis baja de la vacuna, mostró brevemente signos de infección en los pulmones, pero todos los signos de infección desaparecieron dos días después.

5. ¿Qué sigue?

Según informa Novavax, esta es la primera porción de la Fase 1/2 del ensayo clínico.

El desarrollo de vacunas es un proceso de 3 fases, según explican los CDC: en la primera, un pequeño grupo recibe la vacuna, en la segunda, se amplía ese grupo incluyendo participantes que tengan las características de las personas para quienes está diseñada la vacuna, y en la tercera se le da la vacuna a miles de personas para probar su eficacia y si es segura.

Algunas farmacéuticas que están desarrollando las vacunas han realizado las fases 1 y 2 paralelamente para acelerar el proceso.

Fuente: CNN Español. Disponible en https://cutt.ly/ffDq6k6

Cuba participa en seminario sobre acceso a vacuna contra la Covid-19

5 ago. Expertos cubanos del Instituto de Medicina Tropical Pedro Kourí (IPK) y del Finlay de esta capital participan hoy en el seminario virtual 'Acelerando el acceso a la vacuna contra la Covid-19 en América Latina y el Caribe'.

Por la mayor de las Antillas intervendrá la jefa del Centro de Investigación, Diagnóstico y Referencia del IPK, María Guadalupe, quien trasladará la experiencia cubana contra la pandemia.

El evento está organizado por Reino Unido y la Comunidad de Estados Latinoamericanos y Caribeños (Celac), para facilitar el acceso a vacunas, terapias y diagnósticos.

En Cuba, los biotecnólogos laboran en la búsqueda de un medicamento específico contra el nuevo coronavirus, a partir de experiencias anteriores con otras fórmulas.

Instituciones de la isla como el IPK, el Instituto Finlay de Vacunas y el Centro de Ingeniería Genética y Biotecnología trabajan conjuntamente en varias estrategias para obtener candidatos basados en plataformas anteriores como las usadas contra la hepatitis B y la pentavalente, que incluye

antígenos contra cinco enfermedades diferentes.

Varios centros de investigación, empresas y la comunidad científica global trabajan actualmente para obtener una vacuna segura y eficaz que proteja contra el SARS-CoV-2, causante de la Covid-19.

Fuente: Prensa Latina. Disponible en https://cutt.ly/7fDeAjV

Vacuna contra la covid-19: cuán efectiva será, cuándo volveremos a la normalidad y otras preguntas de los lectores de BBC Mundo a una experta en vacunología

6 ago. Es la esperanza con la que sueñan miles de personas en todo el mundo: una vacuna que, finalmente, ponga fin a la pausa global impuesta desde hace meses por el coronavirus.

Varios proyectos y diversas pruebas se realizan ya en distintos países del mundo, todos en la carrera por encontrar la solución a la mayor pandemia que ha afectado a la humanidad en tiempos modernos.

Pero a medida que los proyectos de vacunación progresan también se multiplican las dudas sobre la esperada vacuna.

Este lunes, la Organización Mundial de la Salud alertó que aunque existen varias en su fase final de pruebas, quizás nunca exista una "solución mágica al coronavirus" en forma de una "vacuna perfecta".

Pero entonces ¿por qué es importante vacunarse? ¿Cómo y cuándo llegará a nuestros países? ¿Qué efectos secundarios tendrá? ¿Cuándo volverá todo a la normalidad?

En BBC Mundo recopilamos recientemente sus dudas, temores y preguntas sobre la potencial vacuna contra el coronavirus y se las transmitimos a la doctora María Elena Bottazzi, experta en vacunología tropical de la Escuela de Medicina de la Universidad de Baylor, en Houston, EE.UU.

Botazzi, quien codirige el desarrollo de una de las vacuna contra la covid-19, señala que aún está por verse cuán efectivas serán las primeras generaciones, pero considera que vacunarse será el gran paso para poner fin a la pandemia.

Aquí están sus respuestas a algunas de sus preguntas.

Un numeroso grupo de lectores de BBC Mundo pregunta qué pasaría si, una vez que esté lista la vacuna, deciden no aplicársela.

Las vacunas son desde hace años la mejor forma de atacar y reducir las enfermedades infecciosas, y tenerlas a disposición para poder prevenir algunas enfermedades es un gran avance de la humanidad.

El hecho de que una persona tome la decisión de no vacunarse aumenta el riesgo de que esa persona, cuando tenga la desgracia de enfermarse, pueda desarrollar riesgos para su vida o contagiar a otras personas cuya vida también puede poner en riesgo.

El mensaje es que, una vez que tengamos una vacuna (independientemente de que no sea perfecta y quizás no nos proteja al 100% o solo reduzca la severidad de la enfermedad), igual será una herramienta para asegurarnos la reducción del riesgo de morir.

Al no vacunarnos, estamos jugando al azar de tener una enfermedad más severa, mientras con la vacuna podemos reducir esa probabilidad de riesgo.

Un lector llamado Marcel pregunta cuál sería su mensaje para las personas antivacunas, que hacen campaña contra la vacunación.

Creo que hay que definir este concepto de antivacunas, porque en ocasiones grupos que se categorizan como tal son personas que no cuentan con información adecuada.

También hay otros grupos que utilizan estos argumentos como excusa para dar relevancia a sus agendas políticas, como se ve también con las personas que toman la decisión de no usar las mascarillas o de no mantener la distancia física.

Pero al final el mensaje es que debemos comprender que hay decisiones individuales que tienen un impacto de salud pública, como lo puede ser ponerse el cinturón de seguridad o no tomar alcohol cuando se va a conducir.

Son cosas que no solo hacemos para protegernos a nosotros mismos, sino también para proteger a los demás. Y una vacuna es también como ponerse ese cinturón cuando vas a encender tu carro...

Fuente: BBC News. Disponible en https://cutt.ly/TfDTP3m

¿En qué van y cómo actúan las 5 vacunas para el covid más adelantadas?

7 ago. Un artículo publicado en la prestigiosa revista científica Journal of American Medical Association (JAMA) hace un balance sobre el desarrollo de las vacunas contra el Sars-CoV-2 y el impacto que estos proyectos han tenido en las economías del mundo bajo la premisa de que son la medida más expedita para lograr la normalidad.

De acuerdo con sus autores, la pandemia del nuevo coronavirus ha generado cambios sustanciales en la provisión de atención médica, políticas de salud pública sin precedentes y además en la práctica de la medicina. Todo esto ha impulsado nuevas formas de vivir en la mayoría de personas del planeta.

En paralelo, se han introducido cambios inéditos en los procesos de desarrollo de vacunas, al punto que los plazos habituales de 15 a 20 años que se tenían para la elaboración de biológicos hoy se podrían acortar a menos de un año y medio.

Y aunque las medidas generalizadas de cuarentena, aislamiento y distanciamiento físico han contrarrestado la propagación del Sars-CoV-2, los países siguen enfrentando los desafíos más grandes "para la reapertura de la sociedad", dicen los autores. Y en este punto está claro que la única forma de proporcionar inmunidad efectiva es con una vacuna segura.

Con estos antecedentes, el Departamento de Salud y Servicios Humanos de los Estados Unidos (HHS) lanzó la operación "Warp Speed", una asociación entre el gobierno y la industria que tiene como objetivo entregar 300 millones de dosis de una vacuna eficaz antes de enero del 2021.

En el curso de este ambicioso plan se encontraron con 125 posibles vacunas que rápidamente se redujeron a 14 candidatos en mayo pasado y ya para junio la lista se limitó a cinco candidatos principales.

Y, dada la importancia que esto tiene para los Estados Unidos y el mundo, el artículo analizó el estado de cada uno de esos proyectos principales que en esencia tienen como objetivo buscar la producción orgánica de anticuerpos dirigidos contra una estructura fundamental de la superficie del Sars-CoV-2 ubicada en una de sus espigas, lo que impediría su unión a las células y su replicación.

De las cinco potenciales vacunas algunas tienen como método el ARN mensajero en un virus recombinante y en la utilización de vectores.

Vacunas basadas en ARN mensajero

De acuerdo con el artículo, las vacunas (ARNm) ofrecen una metodología novedosa. Y aunque se ha mostrado prometedora aún no se ha usado comercialmente.

Como se sabe, el ARNm es el paso intermedio entre la traducción del ADN y la producción de proteínas dentro de las células. Y estas vacunas actúan bajo la premisa de que dicho ARNm modificado -es decir diseñado- puede producir un antígeno (proteína estructural del virus) de tal manera que este pueda fabricarse dentro de las células sin producir daño, lo que en teoría conduciría a que el organismo humano reaccione contra él en forma de anticuerpos o de defensas celulares.

La ventaja de estas vacunas es que evita la introducción en el organismo de partes vivas, muertas o de subunidades del Sars-CoV-2, lo que le conferiría un mayor nivel de seguridad.

Sin embargo, debido a que el ARN mensajero es muy susceptible a la acción de enzimas extracelulares que lo pueden descomponer, los investigadores buscan introducirlo dentro de un sistema complejo de lípidos resistentes que lo puedan proteger.

Dos de las cinco vacunas candidatas se basan en esta metodología.

La primera es la de Moderna, una compañía de biotecnología con sede en Massachusetts, que desarrolla el proyecto mRNA-1273, que es una vacuna encapsulada en nanopartículas de grasa que induce la producción de una proteína de

espiga del Sars-CoV-2 completamente estabilizada y que ya ha demostrado producir anticuerpos de defensa.

Esta vacuna, en particular, terminó sus ensayos de fase 2 con dosis aplicadas a 600 participantes adultos e inició sus estudios de fase 3 respaldada con una inversión de 483 millones de dólares de la Autoridad de Investigación y Desarrollado Avanzado Biomédico (Barda, por sus siglas en inglés), que forma parte del HHS. Y la segunda es el proyecto de Pfizer, en conjunto con la alemana BioNtech. Su desarrollo enfoca este ARN encapsulado también en nanopartículas lipídicas que inducen la producción de una proteína de la espiga S del Sars-CoV-2. En el momento, después de terminar sus ensayos en fase 2, están centrados en definir si se deben usar una o dos dosis para una mayor efectividad. Este proyecto no ha buscado el apoyo financiero del gobierno de Estados Unidos para el desarrollo de su producto.

Vacunas de vectores virales verticales

Estos proyectos se basan en el principio de que las vacunas que utilizan virus atenuados garantizan además de una replicación del virus de forma inofensiva, respuestas de defensa mucho más robustas y sostenidas que las vacunas de virus muertos o de subunidades que requieren varias dosis o ayudantes.

En este caso las vacunas de vectores virales en lugar de usar versiones atenuadas del Sars-CoV-2 utilizan versiones competentes de otros virus con gran capacidad de replicación que transportan genes productores de partes del nuevo coronavirus dentro de las células humanas sin producir daño. O en otras palabras, utilizan otros virus inofensivos para introducir a las células material genético capaz de producir pedazos estructurales del Sars-CoV-2 que engañan al sistema inmune del cuerpo para producir defensas duraderas. El ejemplo más reciente de una vacuna producida bajo esta técnica fue la que se desarrolló contra el ébola por la empresa Merck Sharp & Dohme, que vectorizó la respuesta utilizando el virus de la estomatitis vesicular recombinante. Merck Sharp & Dohme se metió en la competencia de la vacuna contra el Sars-CoV-2 y tiene un respaldo de 38 millones de dólares del Barda.

Vacuna de vectores por replicación de adenovirus defectuosos

A diferencia de la vacuna vectorizada que usa un virus inofensivo pero competente para replicarse como vector, los proyectos de este grupo acuden a un adenovirus de simio o de humano defectuoso para replicar partes del Sars-CoV-2. Los dos vectores (virus defectuosos) promueven la producción de una espiga del nuevo coronavirus utilizando genes específicos sobre células humanas.

Al igual que las vacunas ARNm, aún no hay de este tipo en el mercado para prevenir enfermedades. Y según los autores del estudio, su aplicación clínica se ha limitado solo para la rabia animal.

Johnson & Johnson utiliza el vector del adenovirus humano tipo 26, que tiene capacidad de entrar a las células pero sin infectar, y ya terminó los ensayos de fase 2 y da inicio a los de fase 3 con el apoyo de 456 millones de dólares para su desarrollo.

Por su parte, AstraZeneca en unión con la Universidad de Oxford usa el vector inofensivo de simio ChAdOx1 nCoV-19, que comenzó su fase 2 y empieza la fase 3 de pruebas masivas en humanos. Este laboratorio ha recibido 1.200 millones de dólares en fondos de parte de Barda.

En conclusión, las plataformas de vacunas experimentales y la naturaleza trágica de la pandemia han creado un terreno fértil para la innovación, dicen los investigadores. Y aunque ninguna de ellas tiene probado el éxito, los avances de la inmunización masiva ya son una base para procesos que no pueden echarse atrás.

Si bien en los últimos días algunas fuentes rusas han manifestado la existencia de una vacuna desarrollada en ese país ya disponible para su aplicación, lo cierto es que hasta ahora no se conocen estudios concretos que avalen dicho biológico.

Fuente: EL TIEMPO. Disponible en https://cutt.ly/dfDYNYV

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29 records

1.20200246450DIFFERENTIAL COATING OF MICROPROJECTIONS AND MICRONEEDLES ON ARRAYS
US - 06.08.2020
Clasificación Internacional A61K 39/145 Nº de solicitud 16638072 Solicitante Michael Carl JUNGER Inventor/a Michael Carl JUNGER

The present invention relates to devices and methods for coating microprojection or microneedle arrays including arrays that contain vaccine formulations, more specifically to multivalent vaccine formulations where components of the multivalent vaccine might be incompatible. The present invention further relates to stable vaccine formulations for administration via a microprojection array in which the microprojections are densely packed and in which the vaccine formulations are sprayed on to the microprojections such that the formulations dry quickly

2.WO/2020/155222MONOPHOSPHORYL LIPID A-CONJUGATED TN ANTI-TUMOR VACCINE AND USE THEREFOR
WO - 06.08.2020
Clasificación Internacional A61K 39/385 Nº de solicitud PCT/CN2019/075561 Solicitante GUANGZHOU UNIVERSITY OF CHINESE MEDICINE (GUANGZHOU ACADEMY OF CHINESE MEDICINE) Inventor/a LIU, Zhongqiu
Provided in the present invention is a monophosphoryl lipid A-conjugated Tn anti-tumor vaccine, the vaccine being a compound of general formula (I): Y-L-X(I). In the present invention, a TLR4 ligand compound of formula I, a second generation, all-new structure, is used to replace MPLA and couple with the compound of formula II (Tn), which has potential for clinical development, to obtain a two-component vaccine that features a distinct structure and is able to produce a stronger anti-tumor effect, and thus has good prospects for anti-tumor applications.

3.WO/2020/159169VACCINE COMPOSITION FOR PREVENTING TUBERCULOSIS COMPRISING GLYCOSYLATED AG85A PROTEIN AND METHOD FOR PREPARING SAME
WO - 06.08.2020
Clasificación Internacional A61K 39/04 Nº de solicitud PCT/KR2020/001230 Solicitante BIOAPPLICATIONS INC. Inventor/a LEE, Yong Jik

The present invention relates to a vaccine composition for preventing tuberculosis comprising a glycosylated Ag85A protein, a vector for preparing the protein, a transformant using the vector, and a method for producing the glycosylated Ag85A protein by using the transformant. A vaccine composition comprising a glycosylated Ag85A protein of the present invention has the effect of inducing an increase in multifunctional T cells simultaneously secreting IFN-γ, TNF-α, and IL-2 which are important in regard to a defensive effect against tuberculosis, and thus can be usefully used as a vaccine for preventing tuberculosis. Furthermore, the glycosylated Ag85A protein can be effectively expressed in plants and separated with high yield by means of a vector optimized for protein production, and thus can be mass produced at low cost.

4.WO/2020/154941INHIBITING OR ALLEVIATING AGENT FOR INFLAMMATION IN THE BRAIN
WO - 06.08.2020
Clasificación Internacional G01N 33/68 Nº de solicitud PCT/CN2019/073846 Solicitante LIU, Jun Inventor/a LIU, Jun
An inhibiting or alleviating agent for inflammation in the brain comprising an extract from inflamed tissue inoculated with vaccinia virus as the active ingredient. A determination or evaluation method of an extract from inflamed tissue inoculated with vaccinia virus or an agent comprising the extract, characterized in that the inhibition of the expression of pro-inflammatory cytokines and/or NF-κB pathway related proteins induced by the promotion of expression of BDNF in cultivated glial cells is used as an indicator. A use of an extract from inflamed tissue inoculated with vaccinia virus in the production of the inhibiting or alleviating agent for inflammation in the brain.

5.RE048137Multivalent vaccine protection from *Staphylococcus aureus* infection
US - 04.08.2020
Clasificación Internacional A61K 39/09 Nº de solicitud 15903831 Solicitante UNIVERSITY OF MARYLAND, BALTIMORE Inventor/a Mark Shirtliff

Vaccine formulations effective against Staphylococcus aureus, including methicillin-resistant Staphylococcus aureus (MRSA) are disclosed, as well as methods of using the vaccine formulations in the treatment and prevention of Staphylococcus aureus infections in a subject.

6.20200246442PEPTIDE ANALOGS CAPABLE OF ENHANCING STIMULATION OF A GLIOMA-SPECIFIC CTL RESPONSE
US - 06.08.2020
Clasificación Internacional A61K 39/00 Nº de solicitud 16572019 Solicitante University of Pittsburgh - Of the Commonwealth System of Higher Education Inventor/a Hideho Okada

The invention provides a peptide derived from the interleukin-13 receptor α2, which serves as a HLA-A2-restricted cytotoxic T lymphocyte (CTL) epitope. The invention can be used as a vaccine for glioma and can be formulated into compositions for medical or veterinary use. In addition, the invention provides the use of a peptide derived from the Eph family of tyrosine kinase receptors which can be also used as a vaccine for glioma and can be formulated into compositions for medical or veterinary use.

7.20200247849PEPTIDE AGONISTS AND ANTAGONISTS OF TLR4 ACTIVATION
US - 06.08.2020

Clasificación Internacional C07K 7/06 Nº de solicitud 15998974 Solicitante PEPTICOM LTD Inventor/a Amit MICHAELI

A group of peptides is provided which activate or inhibit toll-like receptor 4 (TLR4) and may be used to modulate inflammatory signaling and host defense pathways. The peptides were derived in silico and tested in vitro in cell cultures. These peptides may be used in the preparation of immunomodulatory compositions such as vaccine adjuvants and in pharmaceutical compositions for immunomodulation of the innate immune system such as vaccine adjuvants. The peptides may also be used in the preparation of TLR4 activators, TLR4 inhibitors and MD2 labels, e.g., for research purposes.

8.2911676Hidtil ukendte mukosale adjuvanser og afgivelsessystemer
DK - 03.08.2020
Clasificación Internacional A61K 31/715 Nº de solicitud 13850423 Solicitante The Board of Trustees of the University of Arkansas Inventor/a HARGIS, Billy, M.
Adjuvants comprising chitosan cross-linked with, an aldehyde or mannosylated chitosan are provided herein. Methods of making the adjuvants and methods of combining or linking the adjuvants with antigens are also provided. The adjuvant-antigen combinations can be used in vaccine formulations and the vaccine formulations can be used, in methods to vaccinate animals against the source of the antigen or to enhance the immune response in a subject.

9.3688026PHARMAZEUTISCHE UND IMPFSTOFF-ZUSAMMENSETZUNGEN BASIEREND AUF EINEM ERBB-PEPTID UND IHRE THERAPEUTISCHEN VERWENDUNGEN ZUR BEHANDLUNG VON KREBS
EP - 05.08.2020
Clasificación Internacional C07K 14/71 Nº de solicitud 18863363 Solicitante L2 DIAGNOSTICS LLC Inventor/a MAMULA MARK
Disclosed herein are peptide-adjuvant pharmaceutical compositions and vaccine compositions that trigger long lasting natural anti-tumor antibodies. Such compositions may be used alone, or in combination with anti-cancer agents, chemotherapeutic agents, anti-PD therapy, chemotherapy, radiation therapy, and surgery, in the prevention and treatment of cancer.

10.20200246444ErbB PEPTIDE PHARMACEUTICAL AND VACCINE COMPOSITIONS AND THERAPEUTIC USES THEREOF FOR CANCER
US - 06.08.2020
Clasificación Internacional A61K 39/00 Nº de solicitud 16651037 Solicitante L2 Diagnostics, LLC Inventor/a Mark MAMULA

Disclosed herein are peptide-adjuvant pharmaceutical compositions and vaccine compositions that trigger long lasting natural anti-tumor antibodies. Such compositions may be used alone, or in combination with anti-cancer agents, chemotherapeutic agents, anti-PD therapy, chemotherapy, radiation therapy, and surgery, in the prevention and treatment of cancer.

11.WO/2020/157772MULTIVALENT PNEUMOCOCCAL POLYSACCHARIDE-PROTEIN CONJUGATE VACCINE COMPOSITIONS
WO - 06.08.2020

Clasificación Internacional A61K 39/09 Nº de solicitud PCT/IN2020/050093 Solicitante BIOLOGICAL E LIMITED Inventor/a BURKI, Rajendar
The present invention relates to multivalent pneumococcal polysaccharide-protein conjugates vaccine composition comprising pneumococcal capsular polysaccharide of one or more Streptococcus pneumoniae serotypes conjugated to one or more carrier proteins.

12.WO/2020/158771CANCER VACCINE PREPARATION
WO - 06.08.2020
Clasificación Internacional A61K 39/00 Nº de solicitud PCT/JP2020/003076 Solicitante MIE UNIVERSITY Inventor/a SHIKU, Hiroshi
The present invention provides a vaccine preparation for use in preventing and/or treating cancer, the preparation containing a complex of an antigen and a hyaluronic acid derivative into which a hydrophobic group has been introduced.

13.20200246443THERAPEUTIC CANCER VACCINE TARGETED TO HAAH (ASPARTYL-[ASPARAGINYL]-BETA-HYDROXYLASE)
US - 06.08.2020
Clasificación Internacional A61K 39/00 Nº de solicitud 16856319 Solicitante Panacea Pharmaceuticals Inc. Inventor/a Biswajit Biswas

The present invention encompasses a cancer vaccine therapy targeting Aspartyl-[Asparaginyl]. beta.-hydroxylase (HAAH). The present invention contemplates bacteriophage expressing HAAH peptide fragments and methods for using said bacteriophage in methods of treating cancer.

14.3389701Nucleotidesekvens, der udtrykker et exosomforankrende, protein til anvendelse som vaccine
DK - 03.08.2020
Clasificación Internacional A61K 39/00 Nº de solicitud 17826320 Solicitante Instituto Superiore Di Sanita' Inventor/a FEDERICO, Maurizio Paolo Maria
The present invention concerns a nucleotide sequence expressing a fusion protein, said fusion protein comprising or consisting of an exosome- anchoring protein fused at its C-terminus with an antigen, or a DNA expression vector comprising said nucleotide sequence, for use as vaccine.

15.202017018866VACCINE COMPOSITIONS
IN - 07.08.2020
Clasificación Internacional A61K 39/39 Nº de solicitud 202017018866 Solicitante THE UNIVERSITY OF SYDNEY Inventor/a WHITTINGTON, Richard
The present invention is directed to novel vaccine compositions and methods for immunising subjects against Mycobacterium avium subspecies paratuberculosis. The invention involves the use of mineral oil adjuvants, or white mineral oil adjuvants, more specifically those having CAS 8042-47-5, CAS 1335203-18-3, CAS 1174522-45-2, CAS 1335203-17-2 (or EC equivalents 232- 455-8, 932-078-5, 934-954-2 and 934-956-3, respectively) to reduce lesions or adverse reactions.

16.20200246269Protease Cleavage Site Peptides as an HIV Vaccine
US - 06.08.2020

Clasificación Internacional A61K 9/14 Nº de solicitud 16810441 Solicitante Her Majesty the Queen in Right of Canada as Represented by the Minister of Health Inventor/a Ma Luo

Instead of generating immune responses to several HIV proteins and risk over activating more CD4+ T cells (easy targets for HIV-1 infection) as current candidate vaccines try to do, a lower magnitude, narrowly focused, well maintained virus specific CD8+ T cell response to multiple subtypes should destroy and eliminate a few founder viruses without inducing inflammatory responses that may activate more CD4+ T cells and provide more targets for HIV-1 virus infection. Specifically, described herein is a method that focuses the immune response to the 12 protease cleavage sites.

17.WO/2020/160080OIL/SURFACTANT MIXTURES FOR SELF-EMULSIFICATION
WO - 06.08.2020
Clasificación Internacional A61K 39/39 Nº de solicitud PCT/US2020/015565 Solicitante GLAXOSMITHKLINE LLC Inventor/a LODAYA, Rushit
Methods of manufacturing squalene and alpha-tocopherol-containing oil-in-water emulsions having small oil droplet particle sizes. Such emulsions being of use as vaccine adjuvants.

18.20200246179Cancer Treatment Methods Using Thermotherapy And/Or Enhanced Immunotherapy
US - 06.08.2020
Clasificación Internacional A61F 7/00 Nº de solicitud 16843831 Solicitante Gholam A. Peyman Inventor/a Gholam A. Peyman

A method of therapy for a tumor or other pathology by administering thermotherapy or a combination of thermotherapy and immunotherapy optionally combined with gene delivery. The combination therapy beneficially treats the tumor and prevents tumor recurrence, either locally or at a different site, by boosting the patient's immune response both at the time of original therapy and/or for later therapy. The therapy may further include the administration of a vaccine.

19.20200246445NANOPARTICLES FOR TREATMENT OF ALLERGY
US - 06.08.2020
Clasificación Internacional A61K 39/02 Nº de solicitud 16572483 Solicitante N-Fold LLC Inventor/a Michael J. Caplan

The present invention encompasses the surprising finding that nanoparticle compositions can have beneficial effects on allergy even when prepared without a known specific allergy therapeutic. The present invention provides such nanoparticle compositions. In some embodiments, provided nanoparticles are associated with functional elements that cause the nanoparticles to mimic bacterial cells. The present invention encompasses the surprising finding that provided nanoparticles may be useful for treatment and/or prevention of multiple different allergies in a single patient. The present invention encompasses the recognition that provided empty nanoparticles may be useful as a “pan-allergy” therapeutic and/or vaccine.

20.202017018814USE OF NOX INHIBITORS FOR TREATMENT OF CANCER
IN - 07.08.2020
Clasificación Internacional A61K 39/395 Nº de solicitud 202017018814 Solicitante GENKYOTEX SUISSE SA Inventor/a WIESEL, Philippe

The present invention is related to compounds, methods, compositions and uses that are able to restore responsiveness to immunotherapy, in particular immune check point inhibitors or anti-cancer vaccine or to anti-angiogenesis treatment.

21.202002479 11Purification of Bacterial Polysaccharides
US - 06.08.2020
Clasificación Internacional C08B 37/00 Nº de solicitud 16628413 Solicitante MSD Wellcome Trust Hilleman Laboratories PVT. LTD. Inventor/a Sandeep Sharma

The present invention relates to rapid purification of *Neisseria meningitidis* serogroup W and serogroup Y polysaccharides. The *N. meningitidis* polysaccharides of the present invention are capable of being used in the production of economical polysaccharide protein conjugate vaccine(s) against meningococcal infections.

22.WO/2020/157203MODIFIED STRAIN OF SALMONELLA ENTERICA TYPHI
WO - 06.08.2020
Clasificación Internacional A61K 39/112 Nº de solicitud PCT/EP2020/052298 Solicitante PROKARIUM LIMITED Inventor/a CRANENBURGH, Rocky Marc
The present invention relates to the modification of a live attenuated strain of Salmonella enterica serovar Typhi, wherein its natural surface-exposed polysaccharide and flagellin antigens may be converted to, or augmented by, those from other strains of Salmonella, including S. enterica serovars Paratyphi, Typhimurium and Enteritidis. The present invention also relates to modified strains of Salmonella enterica serovar Typhi being suitable for use as components of a vaccine for enteric fever and salmonellosis.

23.201911010384NANOPARTICLES BASED POLYMER GEL COMBINED MASTITIS VACCINE
IN - 07.08.2020
Clasificación Internacional C09J 161/00 Nº de solicitud 201911010384 Solicitante DR. SHALINI YADAV Inventor/a SHALINI YADAV
The new formulation is an immunologically active sodium polyacrylate nano particle based polymer gel bound aqueous formulation composition comprising at least one nano particle based polymer gel adjuvant with a buffer system and formalized killed whole cell antigen of Staphylococcus aureus (NCBI, GenBank Accession no; MH092071) and E. coli (NCBI, GenBank Accession no. KY914488), capable of eliciting an immune response in a system.

24.3689374ZUSAMMENSETZUNGEN UND VERFAHREN FÜR CHIMÄRE DENGUE-VIRUSKONSTRUKTE IN IMPFSTOFFEN
EP - 05.08.2020
Clasificación Internacional A61K 39/12 Nº de solicitud 20154012 Solicitante TAKEDA VACCINES INC Inventor/a STINCHCOMB DAN T
Embodiments herein report compositions, uses and manufacturing of dengue virus constructs and live attenuated dengue viruses. Some embodiments concern a composition that includes, but is not limited to, a tetravalent dengue virus composition. In certain embodiments, compositions can include constructs of one or more serotypes of dengue virus, such as dengue-1 (DEN-1) virus, dengue-2 (DEN-2) virus, dengue-3 (DEN-3) or dengue-4 (DEN-4) virus constructs. In other embodiments, constructs disclosed herein can be combined in a composition to generate a vaccine against more one or more dengue virus constructs that may or may not be subsequently passaged in mammalian cells.

25.3687571KUTANE IMPFSTOFFE GEGEN PAPILLOMAVIRUS
EP - 05.08.2020
Clasificación Internacional A61K 39/12 Nº de solicitud 18774078 Solicitante DEUTSCHES KREBSFORSCH Inventor/a MÜLLER MARTIN
The present invention relates to an immunogenic polypeptide comprising a multitude of papillomavirus (PV) L2 N-terminal peptides corresponding to amino acids 20 to 50 of the L2 polypeptide of HPV16, wherein said HPV L2 N-terminal peptides are L2 N-terminal peptides from at least four different cutaneous HPV genotypes; and to the aforesaid immunogenic polypeptide for use in medicine and for use in vaccination of a subject against cutaneous HPV infection and/or mucosal HPV infection. The present invention further relates to a polynucleotide encoding the aforesaid immunogenic polypeptide and to vectors, host cells, methods for producing an antibody, as well as antibodies relatedthereto.

26.20200246451METHOD FOR PRODUCING RNA COMPOSITIONS
US - 06.08.2020
Clasificación Internacional A61K 39/145 Nº de solicitud 16838746 Solicitante CureVac Real Estate GmbH Inventor/a Thorsten MUTZKE

The present invention relates to a method for producing a liquid composition comprising a nanoparticle comprising at least one RNA and at least one cationic or polycationic compound, advantageously on a large scale suitable for pharmaceutical applications. The present invention further concerns the use of the inventive method in the manufacture of a medicament or a vaccine. Furthermore, the invention relates to compositions containing the RNA-comprising nanoparticle, and to pharmaceutical compositions comprising the same.

27.20200246455SYNTHETIC CONJUGATE OF CpG DNA AND T-HELP/CTL PEPTIDE
US - 06.08.2020
Clasificación Internacional A61K 39/39 Nº de solicitud 16783568 Solicitante CITY OF HOPE Inventor/a Don J. DIAMOND

Highly effective vaccine compositions are constructed according to the methods of this invention. The methods are amenable to use with any peptidic antigen sequence and involve covalent attachment of an immunostimulatory nucleotide sequence to an antigenic peptide sequence. Preferred antigenic peptides are fusion peptides made up of one or more CTL epitope peptides in sequence fused to a T helper peptide.

28.202017019000A ZIKA VIRUS CHIMERIC POLYEPITOPE COMPRISING NON-STRUCTURAL PROTEINS AND ITS USE IN AN IMMUNOGENIC COMPOSITION
IN - 07.08.2020
Clasificación Internacional C07K 14/18 Nº de solicitud 202017019000 Solicitante INSTITUT PASTEUR Inventor/a ROTH, Claude
The present invention is directed to a Zika virus (ZIKV) chimeric polyepitope comprising non-structural proteins and its use in an immunogenic composition. The present invention provides means, in particular polynucleotides, vectors and cells expressing said chimeric polyepitope. The present invention also relates to a composition or a vaccine comprising at least one of said polyepitope, polynucleotide, vector or host cell for use in the prevention of a ZIKV infection in a human subject, or for use in the prevention of ZIKV and dengue virus (DENV) infections in a human subject.

29.20200247852HEADLESS HEMAGGLUTIN INFLUENZA VACCINE
US - 06.08.2020
Clasificación Internacional C07K 14/005 Nº de solicitud 16649905 Solicitante Georgia State University Research Foundation, Inc. Inventor/a Baozhong Wang

Disclosed are universal influenza based on a truncated influenza hemagglutin (HA) protein lacking a head domain (hrHA). Also disclosed is a composition comprising a nanoparticle coated with a disclosed hrHA polypeptide. Also disclosed is a composition comprising a virus like particle (VLP) expressing on its surface a disclosed hrHA polypeptide.

Patentes registradas en la United States Patent and Trademark Office (USPTO)

Results of Search in US Patent Collection db for: (ABST/vaccine AND ISD/20200801->20200807), 13 records.

	PAT. NO.	Title
1	RE48,137	Multivalent vaccine protection from Staphylococcus aureus infection
2	10,731,129	Methods of evaluating immunogenicity of an agent using an artificial tissue construct
3	10,730,920	Recombinant polypeptides derived from FBP1 and FBP2 and uses of the same
4	10,730,910	Immunotherapy against several tumors of the blood, in particular chronic lymphoid leukemia (CLL)
5	10,730,907	Compounds
6	10,729,780	Methods for improving the adsorption of polysaccharide-protein conjugates and multivalent vaccine formulation obtained thereof
7	10,729,766	Method for improving the efficacy of a survivin vaccine in the treatment of cancer
8	10,729,764	ISCOM preparation and use thereof
9	10,729,763	Mixtures of polysaccharide-protein pegylated compounds
10	10,729,761	Vaccination in newborns and infants
11	10,729,757	Vaccine against RSV
12	10,729,756	Viable viruses with foreign tags
13	10,729,755	Peptides and combination of peptides for use in immunotherapy against pancreatic cancer and other cancers

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